

BEST AVAILABLE COPY
BEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | ET | JL916 | 08-10-01 |
| RESPONSE FORMALITY REVIEW | ET | JL878 | 10-17-01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date | Claim | Date | Claim | Date |
|-------------------|------|-------------------|------|-------------------|------|
| Final Original | | Final Original | | Final Original | |
| 1 | | 51 | | 101 | |
| 2 | | 52 | | 102 | |
| 3 | | 53 | | 103 | |
| 4 | | 54 | | 104 | |
| 5 | | 55 | | 105 | |
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| 35 | | 85 | | 135 | |
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| 37 | | 87 | | 137 | |
| 38 | | 88 | | 138 | |
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| 40 | | 90 | | 140 | |
| 41 | | 91 | | 141 | |
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| 47 | | 97 | | 147 | |
| 48 | | 98 | | 148 | |
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| 50 | | 100 | | 150 | |

If more than 150 claims or 10 actions
staple additional sheet here

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135
10-17-01